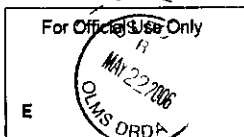


FORM LM-30

LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

This report is mandatory under P.L. 86-257 as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C. 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT

1 File Number U 013-253 25751	2 Fiscal Year Covered From 1 / 1 / 05 Through 12 / 31 / 05
3 Name and address of person filing Name THOMAS R MELCHER P.O. Box Bldg Room No. if any Street 212 W SANDLE AVENUE City PITTSBURGH State PA ZIP Code + 4 15237	4 Name, file number, and address of labor organization Name IRON WORKERS LOCAL UNION #3 Labor Organization File Number 013-253 P.O. Box Building and Room Number if any Street 2201 LIBERTY AVENUE City PITTSBURGH State PA ZIP Code + 4 15222
5 Position in labor organization BUSINESS AGENT/TRUSTEE	

Enter appropriate data below if during the past fiscal year you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions)

A Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent	
6 Name and address of Employer (including trade name, if any) Name Trade Name, if any P.O. Box Bldg Room No. if any Street City State ZIP Code + 4	7 a Nature of Interest Transaction or Income 7 b Amount

Signature

15 Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents) has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)	
Signed <u>Thomas R. Melcher</u>	On <u>May 12, 2006</u> <u>412-367-5039</u> Date Telephone Number

Name of Person Filing THOMAS R MECHER	File Number U 013-253
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B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

8 Name and address of Business (including trade name if any) Name Trade Name if any P O Box Bldg Room No if any Street City State ZIP Code + 4	9 Business deals with <div style="margin-left: 40px;"> a Labor Organization b Trust c Employer </div>
10 If 9 b or 9 c is checked give trust or employer's name Name Trade Name if any P O Box Bldg Room No if any Street City State ZIP Code + 4	11 a Nature of such dealing 11 b Approximate dollar value of such dealing 12 a Nature of interest held or income received 12 b Amount

C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value	
13 a Name and address of Employer or Labor Relations Consultant (including trade name if any) Name IRONWORKERS OF W PA BENEFIT PLANS Trade Name if any P O Box Bldg Room No if any ROOM 203 Street 2201 LIBERTY AVENUE City PITTSBURGH State PA ZIP Code + 4 15222	14 a Nature of payment INTERNATIONAL FOUNDATION OF EMPLOYEE BENEFIT PLANS CONFERENCE 11-12-05 TO 11-16-05 DAILY EXPENSE > HOTEL TRANSPORTATION CONFERENCE FEES
13 b Is the Business an Employer or Consultant ?	14 b Amount of payment \$6,386.49